Case: 2:25-cv-00188-JUnited States District Counte: 1 of 6 PAGEID #: 10

RECEIVED EASTERN DISTRICT FEB 27 2025 Bathanyowayara (Enter above his full hame of the plaintiff in this action) V5 2:25 CV 0 188 RH HOPKINS INDIVIDUAL CAPACITY RN DUNN Individual capacity JUDGE GRAHAM 3 (Enter above the full name of the defendant or defendants in this action) MAGISTRATE JUDGE SILVAIN COMPLAINT I. Previous Lawsuits Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes () No (1/) If your answer to A is yes, describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline. Parties to this previous lawsuit Plaintiffs _ Defendants =

2. Court (if Federal Court, name the District; if State Court, name the County)

3. Docket Number____

4. Name of Judge to whom case was assigned ______

5. Disposition (for example, Was the case dismissed?
Was it appealed?

Is it still pending?

C	2 5 0.	6. Approximate date of filing lawsuit: 2:25-cv-00188-JLG-PBS Doc #: 1-1 Filed: 02/27/25 Page: 2 of 6 PAGEID #: 11
C	usc.	7. Approximate date of disposition
II.	Plac	ce of present confinement Pickway Correctional Institution
	Α.	Is there a prisoner grievance procedure in this institution? (V) Yes () No
1	B.	Did you present the facts relating to your complaint in the state prisoner grievance procedure? Yes No ()
(C.	If your answer is YES,
		1. What steps did you take? I filed an informal complaint and an
		affect after the informal complaint was denied.
		These west filed at FMC and Madison Com. Institution
		2. What was the result? Grevance Has desired stating "No further
		action Will be taken on this matter."
D).	If your answer is NO, explain why not
E.	. I	If there is no prison grievance procedure in this institution, did you complain to the prison authorities? Yes () No ()
F.	I	If your answer is YES,
	I	What steps did you take?
	2	?. What was the result?
m n	. •	
III. Par	ties	
In I. for	tem addi	A below, place your name in the first blank and place your present address in the second blank. Do the same itional plaintiffs, if any.
Α.		ame of Plaintiff Anthony Scott #616784

Address Pickway Corr. Inst- 11781 St. Rt. 762 Orient, OH 43146

In Item B below, place the full name of the Defendant in the first blank, his official position in the second blank, and his place of employment in the intra blank. Use them C for the names, positions, and places of employment of any additional defendants.			
B.	Defendant M5 bunn is employed as RN-Registered		
	NUTSE at Chillicothe Corr. Institution		
C.	Additional Defendants 115 Hof Kins-Registered Nurse at Chillicothe		
	Corr. Institution		
	Mr. John Doe. " San't Knowhis Position at Chillicote Corr.		
	Institution		
Statement of claim.			
State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.			

IV.

On Saturday, June Jth, 2024 between 1:30 A.M. - 3:00 A.M. While at Chillicothe Corr. Institution I suffered several seizures repeatedly. After the sciences subsided a Nurse and a Correction offices, one Person under each arm escented me down two flights of steps to an avaiting golf cart and another durse. I was instructed to sit on a small sent directly behind the driver. The sept was positioned at the side edge of the golf cart. I was very groggy and no one was back there with me nor was I secured in any Way. The Hurse made a 90° turn and all I Know is I was on the ground in intense Pain. The Nurses and "John Noe" Was Yelling at me. Get UP! YOU can Halk! You Probabl) high or drunk!" "Tohn Doe" then rolled me on my side. and Pushed all his body weight down on me as if he was trying to Rush me through the concrete soxing through clenched teeth, "Get up. Ain't nothing wrong with you. I Passed put there after Continue on next Page - Attachment 132

Case: 2.25-K-00188-9RE-PBS DOC# 9-Affel 902127128 Page! 4648 PAGEND#: 480 Still today I have no recollection of being there.

Later that day I was transported to OSU Med. where I stayed until June 10th and was Prescribed a cane, a 4 wheel walker and medication, for the deep abrasions to MY right arm, right leg, and the back of MY head. I was sent back to Chillicothe Corr. Institution June 10th, 2024 and the medical personell refused me everything OSU Med Prescribed me, including the cane and 4 wheel walker. The Nurses at Chillicothe also measured a Knot on back of MY neck 6 cm wide, 6 cm long, and protruding 3.5 cm. On June 11th, 2024 I was sent to FMC/CMC where I stayed until June 25th, 2024. I was diagnosed with seizures and sciptica nerve damage. Once again a cane and a four wheel walker was Prescribed to me. I utilized them for three months.

I am filing this 8th Amendment violation claim against
MS. Dunn (RN) for:

- 1) Deliberate Indifference to serious medical needs.
- 2) Medical Negligence
- 3) Pain and Suffering

TK

- 4) Future Pain and Suffering
- 5) Cruel and Unusual Punishment
- 6) Enotional Distress

Case: 2.75-24-20168 ALG-PAS: Dog#. 1-4 Filed: 02/27/25 Page 5/06 PAGED #94 inst

Ms. Hopkins (RN) for:

1) Deliberate Indifference to serious medical needs

2) Medical Negligence

3) Pain and Suffering

4) Future Pain and Suffering

5) Cruel and Unusual Punishment

6) Emotional Distress

I am filing this 8th Amendment violation claim against "John Doe" for:

1) Deliberate Indifference to serious medical needs.

2) Pain and Suffering

3) crue and unusual Punishment

4) Medical Negligence

5) Emotional Distress